		T200A	DIVISION OF CHIL	F ENVI	HEALTH AND SOCIAL SE IRONMENTAL HEALTH ARE FACILITY ION REPORT	RVICES	man da	TILET A MOTAGO
REA Regular Follow-Up Complain		GRADE	Inspection Date: OS 09 2018 Time In/Out: 10:40/m 1:20/m Sanitary Permit No.: 20000	ESTABLISHMENT NAME: TAMUNING DAY CAPE AND WHENING CONTER OWNER/OPERATOR: ORISOSTOMO TRACH				
Investigat Other:		RATING		LOCA TA1	LOCATION: Establishment Type: CCC/N PERMIT STATUS:ValidTemporaryExpired			
No. of Chile	Idran 32	Mala 22	Female 54 Total	_	Care License: No.: 160199		emporary _	Expired
The fo	following ite	ems identify r as the Dep	violations found this da partment indicates. Non request for hearing must	ay in the	e operations and facilities w liance may result in downgr bmitted before the indicate	vhich must b	be corrected ermit suspens n date.	by the next sion. To appea
I I LIVI	A. 05	5111 A/2		11 68		2. 4	DEMERIT	CORRECT BY
	1	NS INS		Cen		ज्याह		
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	Discuss	HT CO2	HS PERPORT UN	1764	TRACY CRISOSTOM			
					DIRECTOR / OWNER	2.		OCCUPANT NAME OF THE PARTY OF T
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	1520(111)	HE SHOW	arenala e e					
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					nd I am aware of the cor		easures to b	e taken.
	above, the		corrected within	(Inspector (Name & Title)	toc		
(2), (4), (6)				7.8	PAYMUNDO, OPHO	E).		

Rev: 08/2/05 DEH-06